

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

**Order for Hearing
Petition for Guardianship
of Minor**

☐ Temporary ☐ Standby
☐ Permanent ☐ Successor

Case No. _____

Date of Birth

<input type="checkbox"/> temporary guardianship of	<input type="checkbox"/> person	<input type="checkbox"/> estate.
<input type="checkbox"/> permanent guardianship of	<input type="checkbox"/> person	<input type="checkbox"/> estate.
<input type="checkbox"/> standby guardianship of	<input type="checkbox"/> person	<input type="checkbox"/> estate.
<input type="checkbox"/> successor guardianship of	<input type="checkbox"/> person	<input type="checkbox"/> estate.

THE COURT ORDERS THAT:

1. The petition be heard at the _____ County Courthouse, _____, Wisconsin, Room _____, before _____ Court Official, on _____, at _____ or when scheduled thereafter.

Date

Time
2. Notice of time and place of hearing the petition be given by service of a copy of this order and a copy of petition upon the minor and all interested persons as required by law.
3. The minor, if age 14 or over, shall appear in person at the hearing.

NOTICE: If this is a Temporary Guardianship proceeding, the minor is notified of the right to counsel and the right to petition for reconsideration or modification of the temporary guardianship within 30 days of receipt of this notice.

If you need help in this matter because of a disability, please call:

☐ Please check with attorney below for exact time and date.

Name of Attorney

Address

Telephone Number

BY THE COURT:

Circuit Court Judge/Court Commissioner/Register in Probate

Name Printed or Typed

Date _____